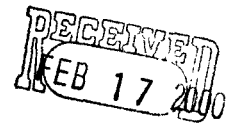
RCRA SECTION 3007 SURVEY FOR PAINT MANUFACTURING FACILITIES

PART 1: INTRODUCTION/OVERVIEW



1. Why did I receive this RCRA Section 3007 Questionnaire?

The United States Environmental Protection Agency (EPA, the Agency) sent you this RCRA Section 3007 Questionnaire (also referred to as "questionnaire") because your facility may manage certain residuals generated from the manufacture of paints and coatings.[1] Your facility was selected by EPA from a universe of facilities which produce paints.

The Agency is now determining whether certain residuals generated from paint and coatings manufacturing should be classified as listed hazardous waste in the Code of Federal Regulations under the Resource Conservation and Recovery Act (RCRA), 42 USC 6901 et seq. This process is known as a hazardous waste listing determination.

The EPA is using this questionnaire to gather information about solid and hazardous waste management practices in the U.S. paint and coatings industry. Specifically, the Agency is collecting information on five residuals: (1) solvent cleaning residuals generated from tank and equipment cleaning operations; (2) water and/or caustic cleaning residuals generated from tank and equipment cleaning operations; (3) wastewater treatment sludges; (4) emission control dusts or sludges; and, (5) off-specification production residuals. The information you provide EPA will be used to make hazardous waste listing determinations that must be proposed by January 28, 2001 and finalized by March 30, 2002. All non-confidential information will be made publicly available in the RCRA Docket.

If your facility does not currently manufacture paint and coatings or is not included within the scope of this questionnaire, then you received this questionnaire in error. Please verify that your facility does not currently manufacture paint by, (1) completing Part 3, (2) signing and dating the certification statement in Part 6, and (3) returning the certification to the address listed in Part 2, Question 5 within fourteen (14) calendar days of the date of receipt of this questionnaire.

[1] This includes paints, stains, lacquers and varnishes that may generally be categorized under Standard Industrial Code (SIC) 2851,or North American Industry Classification System (NAICS) 325510, as architectural coatings; product finishes for original equipment manufacturers, or OEM, which includes industrial product finishes (this category is referred to as "OEM"); and special purpose coatings. It does not, however, include miscellaneous allied paint products specified under SIC 28515 (NAICS 325510A0) or artist paint which is included under SIC 3952 (NAICS33941). For purposes of this questionnaire, products produced within the paint and coatings industry and included within the scope of this questionnaire may be referred to as "paint."

For technical assistance, call the Agency's toll-free message line at 1-800-424-9346 or email questions to the following address, epahotline@bah.com

2. Am I required to respond to this questionnaire?

Yes. You are required to provide EPA this information under §3007 of RCRA 4C USC 6927. This information collection has been approved by the Office of Management and Budget (OMB) Clearance Number 2050-0168 which expires on 06/30/2001.

Failure to submit the requested information within thirty (30) days of receipt of this questionnaire can result in civil penalties under §3007 of RCRA 4C USC 6927.

Please note that this questionnaire should be completed using available information or best engineering judgement. You are not required to generate any new data. Please answer each data request. If you cannot answer a question using available data or best engineering judgement, specify "unknown" in your reply.

Public reporting burden for this collection of information is estimated to be 30 hours per response to the questionnaire. This includes time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the questionnaire responses. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control numbers for EPA's regulations are listed in 40 CFR Part 9 and 48 CFR Chapter 15.

Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden to the Director, OPPE Regulatory Information Division, U.S. Environmental Protection Agency (2137), 401 M St., S.W., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, 725 17th Street, NW, Washington, DC 20503, Attention: Desk Officer for EPA. Include the EPA ICR number and OMB control number in any correspondence.

3. How is this questionnaire structured?

This questionnaire is divided into six main parts followed by one Appendix:

- **Part 1. Introduction/Overview**
  Provides an overview of the scope of this questionnaire.

- **Part 2. Instructions on How to Complete the Questionnaire**
  Guides you through completing the questionnaire. This part also contains information on how to claim information on confidential business information (CBI).

- **Part 3. Corporate and Facility Information**
  Collects corporate and facility information such as facility name, location, and mailing address.

- **Part 4. Residual Generation and Management Practices**
  Collects information on residuals and how you manage them. The tables in Part 4 (Tables 4a-d) require you to identify your residuals and report residual management practices.

- **Part 5. Chemical Constituent List**
  Asks you to identify constituents present in your residuals.

- **Part 6. Certification Statements**
  Verifies that the information your facility reports is valid. A senior official with authority over plant operations at your facility must sign this statement after the questionnaire is completed.

- **Appendix A. Confidentiality Claims**
  Contains the necessary paperwork to make a RCRA Confidential Business Information (CBI) claim under 40 CFR Part 2. You are required to make a CBI claim for **each** data element you consider sensitive.

★ **Enclosures 1, 2 and 3** provide the respondent with helpful hints on completing the questionnaire, background information on the listing determination and confidential business information.

★ **Enclosure 4** contains master copies of all forms as well as facility identification (ID) labels. For your convenience, this packet contains master copies of forms that you may use to photocopy all forms your facility must complete. We have also included facility ID labels you will use to identify each form your facility completes.

★ **Enclosure 5** contains example questionnaire responses. These examples are designed to illustrate how to complete the questionnaire and to help save you additional time when completing this questionnaire. Refer to these examples if you are unsure how to respond to a question.

Please read through the entire questionnaire before completing each part sequentially.

4. Which residuals should I report in my response to this questionnaire?

The Agency is collecting information on five residuals generated by the paint manufacturing industry: (1) solvent cleaning residuals generated from tank and equipment cleaning operations; (2) water and/or caustic cleaning residuals generated from tank and equipment cleaning operations; (3) wastewater treatment sludges; (4) emission control dusts or sludges; and, (5) off-specification production residuals. For purposes of this questionnaire the Agency is defining these five residual types as:

1. **Solvent Cleaning Residuals:** Residuals generated when equipment, tanks, and ancillary piping are washed with a solvent or a blend of solvents.

   - These residuals are defined by the type of cleaning reagent that is being used in the cleaning process. For example, a residual of this type can be generated by cleaning a wastewater tank with a solvent.
   - Residuals include, but are not limited to, spent solvent cleaning tool baths, solids generated from still bottoms, spent solvent wash streams used to clean tanks, equipment, and ancillary piping which is removed for off-site disposal, solvent cleaning bath or storage tank bottoms.
   - **You are not required to report any solvent cleaning residuals which you use or reuse in an industrial process to make a product, provided these materials are not being reclaimed** (e.g., You are not required to report solvent cleaning residuals from tank and ancillary pipe cleaning which are used in the next batch as an ingredient to make the next product).[2]

2. **Water and/or caustic cleaning residuals:** Residuals generated when equipment, tank, and ancillary piping are washed with water, caustic, or a blend of water and caustic.

   - These residuals are defined by the type of cleaning reagent, that is being used in the cleaning process.
   - Residuals include, but are not limited to, washwater which has been used to clean tanks and is sent to a POTW (Publicly owned treatment works) or to an on-site wastewater treatment system or is removed off-site for disposal, and washwater which is sent for processing to be reused on-site.
   - **You are not required to report any generated water and/or caustic residuals which you use or reuse in an industrial process to make a product, provided these materials are not being reclaimed** (e.g., You are not required to report wash waters from tank, equipment and ancillary pipe cleaning which go from the cleaned tank into another blending tank and is

[2]Refer to 40 CFR 261.2 (Definition of Solid Waste) for more information. The existing rules exclude from the definition of solid waste secondary materials that are: used directly (without reclamation; EPA defines **reclamation** as either **recovery** of useful product or **regeneration** of a product for its original use) as ingredients in manufacturing processes to make new products; used directly as effective substitutes for commercial products; or returned directly to the original process from which they are generated as a substitute for raw material feed stock.

used directly as an ingredient in the next batch).[2]

3. **Wastewater Treatment Sludges:** Sludges generated from the on-site treatment of plant equipment and tank cleaning washes, and other miscellaneous wash water streams through physical and/or chemical treatment (e.g., sludges generated from waste water treatment of floor washings).

   - **You are not required to report any generated wastewater treatment sludges which you use or reuse in an industrial process to make a product, provided these materials are not being reclaimed.** (e.g. You are not required to report wastewater treatment sludges that are used in the next batch as an ingredient in the next product.) [2]

4. **Emission Control Dust or Sludge:** Dusts or sludges collected in air pollution control devices such as baghouses.

   - **You are not required to report any generated dusts or sludges from an air pollution control device (e.g., a baghouse dust) which you use or reuse in an industrial process to make a product, provided these materials are not being reclaimed** (e.g., You are not required to report baghouse dust which is collected in a drum and reused directly as an ingredient in a future batch).[2]

5. **Off-Specification Production Residual:** Off-specification products manufactured at the plant or returned by a customer which cannot be used or reworked back into the manufacturing process that generated it, or cannot be sold as a lesser grade product, and has been deemed to be a waste and is destined for disposal.

   - **You are not required to report any generated off-specification product which you use or reuse in an industrial process to make a product, provided these materials are not being reclaimed.**[2]
   - Although you are not required to report any off-specification product which is being stored on-site for purposes of reuse back into the manufacturing process, you will be required to respond to two questions pertaining to the overall management of this off-specification product in Part 3 of this questionnaire.

[2] Refer to 40 CFR 261.2 (Definition of Solid Waste) for more information. The existing rules exclude from the definition of solid waste secondary materials that are: used directly (without reclamation; EPA defines **reclamation** as either **recovery** of useful product or **regeneration** of a product for its original use) as ingredients in manufacturing processes to make new products; used directly as effective substitutes for commercial products; or returned directly to the original process from which they are generated as a substitute for raw material feed stock.

PART 2: INSTRUCTIONS ON HOW TO COMPLETE THE QUESTIONNAIRE

1. Do I have to answer all questions?

Yes. Your facility must address all questions and certify to the truth and completeness of the responses in the Part 6 Certification. A senior official at your facility having authority over plant operations should complete the Part 6 signature/certification block. While your facility may hire a consultant to help you complete the questionnaire; your facility alone is responsible for the information provided in your response. Responses may be typed or handwritten neatly.

You are only expected to complete this questionnaire using available information or best engineering judgement. When responding to these questions, you are not required to generate any new data. As specified earlier, please answer each data request. If you cannot answer a question using available data or best engineering judgement, then specify "unknown" in your response.

If your facility does not currently manufacture paint and coatings or is not included within the scope of this questionnaire, then you received this questionnaire in error. Please verify that your facility does not currently manufacture paint by, (1) completing Part 3, (2) signing and dating the certification statement in Part 6, and (3) returning the certification to the address listed in Part 2, Question 5 within fourteen (14) calendar days of the date of receipt of this questionnaire.

2. How do I complete this questionnaire?

This questionnaire is divided into six main parts. Each part builds upon the previous part. Follow these guidelines when completing this questionnaire sequentially:

- Parts 1 and 2 provide general information about how to complete the questionnaire. For instance, the residual descriptions in Part 1, Section 4, will help you identify residuals included within the scope of this questionnaire that your facility generates.
  - ▸ Read these parts before you start completing the forms in parts 3-6.
- Parts 3-6 contain forms (in table format) that request data specific to your facility. Each form is accompanied with a set of directions. Responses may be typed or handwritten neatly.
  - ▸ Copy the questionnaire forms provided in Enclosure 4 and use the photocopied forms for all forms your facility must complete. Refer to directions in the questionnaire when

completing each form.

- Place a facility ID label on the upper right-hand corner of every page you complete and return to EPA.
- Copy and use the form in Appendix A to substantiate each CBI claim that you make.
- Use the example questionnaire responses in Enclosure 5 to help you complete each form.
- Return completed forms (including the certification statement in Part 6) to EPA.

3. How can I claim information as RCRA Confidential Business Information (CBI)?

If you believe that some of the information you supply is commercially sensitive, then you may claim protection for this information as RCRA Confidential Business Information (CBI) under 40 CFR Part 2. You may not withhold information from the Agency because you claim it as confidential. Information that you claim to be confidential is handled by EPA according to the provisions set forth in 40 CFR Part 2 Subpart B. Information that you do not claim as CBI upon submission of this questionnaire may be made available to the public without further notice to you.

You may make a CBI claim for **each** data element requested in this questionnaire that you consider sensitive data. If you are claiming a data element as CBI, check the space marked CBI which is located next to each specific information request. Complete Appendix A for each CBI claim you make. Appendix A provides a copy of what is required to properly substantiate your CBI claim. This will signify to the Agency that you deem the information (data element) as CBI. **You are required to substantiate each data element claimed as CBI.** Businesses should transmit RCRA CBI to EPA by registered mail, return receipt requested, in a double envelope. If you do not substantiate your claim, then you waive your right to claim the information as CBI. Claims of confidentiality for information which are typically available through public resources (e.g., company name and address, site topography) are unlikely to be supportable.

EPA must protect all information claimed as CBI from disclosure to anyone other than EPA and its authorized representatives. This information may not be released under the Freedom of Information Act (FOIA) unless the Agency denies a specific CBI claim. We must notify you if we intend to deny a CBI claim, and you have the right to seek judicial review.

4. How do I submit my responses to this questionnaire if I have claimed RCRA CBI?

If you have claimed any portions of this questionnaire as CBI, please send the completed questionnaire within 30 days from date of receipt by the addressee to the CBI Document Control Officer Regina Magbie at the following address using next day delivery:

Regina Magbie (703)308-7909
Office of Solid Waste
U.S. Environmental Protection Agency
2800 Crystal Drive- 7th floor
Arlington, VA 22202

PLEASE NOTE: All CBI materials must be double wrapped. The inner wrapping must be labeled with the transferee's name and the statement "RCRA Confidential Business Information – To Be Opened By Addressee Only." The outer wrapping must be labeled only with the name and address of the recipient and the return address of the transferor. **Do not indicate on the outer wrapper that the package contains RCRA CBI.**

5. How do I submit my responses to this questionnaire if I have not claimed RCRA CBI?

For all non-CBI submittals, please return the completed questionnaire within 30 days from date of receipt by the addressee to:

For Standard Postal Delivery:

David J. Carver **(Mailcode 5304W)**
Office of Solid Waste
U.S. Environmental Protection Agency
Ariel Rios Building
1200 Pennsylvania Avenue NW
Washington, D.C. 20460

For Overnight Delivery or Courier Service, please use the following address:

David J. Carver (703)308-8603
Office of Solid Waste
U.S. Environmental Protection Agency
2800 Crystal Drive- 9th floor
Arlington, VA 22202

6. Whom do I contact for technical assistance on this questionnaire?

The Agency has established a toll-free message line and email account to take your questions. EPA will respond to your questions as soon as possible.

Toll-free message line
Toll-free number: 1-800-424-9346
Local number: 703-412-9810
TDD line: 1-800-553-7672

Please leave your name, telephone number, facility name and suggestion of the best time to return your call.

Email
Internet email address: epahotline@bah.com

If you wish to speak to someone in person, please leave your name, facility name, and phone number (along with suggested times to call back) in your email message.

PART 3: CORPORATE AND FACILITY INFORMATION

The purpose of this part is to provide general information about your facility such as: your facility name, location, mailing address, and contacts. Federal environmental permit numbers are requested so that the Agency can obtain information submitted to EPA under different reporting requirements. This will help reduce the amount of repetitive information your facility is required to report to EPA in this questionnaire.

A. Name of Facility _____

B. Physical Address of Facility (please do not include post office boxes)

Street _____

_____

City _____ State _____ Zip _____

C. Parent Corporation (if any)_____

D. Physical Location of Corporation Headquarters

Street _____

_____

City _____ State _____ Zip _____

E. Federal Environmental Permit Numbers:

EPA Identification Number or RCRA Hazardous Waste ID Number:_____

Clean Water Act Pretreatment Permit Number: _____

Clean Water Act National Pollutant Discharge Elimination System (NPDES) Permit Number:

_____

Clean Air Act Title V Permit Number: _____

F. Facility Contacts (names of personnel we may contact for additional technical information pertaining to this questionnaire)

Name	**Title**	**Telephone Number**
_____	_____	_____
_____	_____	_____
_____	_____	_____

PART 3: CORPORATE AND FACILITY INFORMATION (Cont'd)

G. Off-Specification Product Management Practices:

Complete this section if your facility manages off-specification product manufactured on-site or received from another facility (including a customer). Check the appropriate response.

1. Does your facility store off-specification product as defined in Part 1, Section 4 of this questionnaire?
____yes____no

a. If yes to G.1, does your facility have a tracking system that tracks the location and types of off-specification product stored? _____yes _____no

b. If yes to G.1, state the average age of the stored off-specification product on-site.
_____ days/months/years **(Circle unit of time)**

PART 4: RESIDUAL GENERATION AND MANAGEMENT PRACTICES

Part 4 is designed to collect information on residuals generated by the paint and coatings industry that are include within the scope of this questionnaire. It is comprised of four types of tables:

- Table 4a lists the types of paint manufacturing residuals the Agency is characterizing. You will identify all residuals your facility generates on this table.
- Tables 4b and 4c request that you further characterize each residual identified in Table 4a and how it is managed. Depending on the residual, you may be required to complete either Table 4b or 4c, or both.
- Tables 4d.1-4d.9 ask you to characterize residual management units you identified in Table 4c. (NOTE: Tables 4d.1-4d.9 only apply if you are required to complete Table 4c.)

Use the matrix below to help you identify which tables you are required to complete for each residual specified in Table 4a.

Residual/Management Matrix

If your residual is...	and it carries a Federal RCRA...	*for example... (EX)	then complete Tables...
hazardous	listed hazardous waste code(s) **other than** F003	EX1: F005	4a, 4b
	listed hazardous waste code(s) **other than** F003 **and** characteristic hazardous waste code(s) **and/or** F003	EX1: F005, D001, D003 EX2: F005, F003 EX3: F005, F003, D001, D003	4a, 4b
	characteristic hazardous waste code(s) **and/or** F003	EX1: D007 EX2: D001, D008 EX3: F003 EX4: F003, D007, D001, D008	4a, 4b, 4c, 4d
nonhazardous	**no** Federal RCRA listed or characteristic hazardous waste code(s)	no codes	4a, 4c, 4d

* The examples in this table illustrate that a RIN may carry one or more of the example codes.

Note: For your convenience, we have included master copies of all forms (Tables 4a - 4d) in Enclosure 4. Use these master copies to photocopy all forms your facility must complete. Place a facility identification (ID) label in the upper right-hand corner of each page you complete.

Part 4a. Residual Characterization

Directions for Table 4a: Use Table 4a to *identify all residuals* that your facility generates. You only need to fill this table out once for your facility. Refer to Part 1 for a more detailed description of the residuals included within the scope of this questionnaire. **If you claim any information on Table 4a as CBI, complete a substantiation form (Appendix A) for each CBI claim and submit all of your completed forms to the address identified in Part 2, Question #4.**

Box #1 Check (✔) all residuals that your facility generates.

- These residuals are categorized as hazardous and nonhazardous liquids, sludges, or dusts. For purposes of this questionnaire, if a residual is hazardous then it is regulated as a Federal RCRA *hazardous* waste as defined in 40 CFR §261.3.

Box #2 Assign each residual a Residual Identification Number (RIN).

- Place a facility ID label (provided in Enclosure 4) in Box #2 under "Facility ID." Use this label to copy your Facility ID when assigning a RIN.
- Use this RIN to identify this residual throughout the questionnaire.

Box #3 Refer to "Next Step" in Box #3 to identify which table (either Table 4b or Table 4c) you should fill out next.

Refer to example questionnaire responses in Enclosure 5 for clarification on how to complete Table 4a.

Table 4a: Residual (RIN) Characterization

#1. Type of Residual *See Part 1 (Introduction/Overview) for a detailed description of residuals included within the scope of this questionnaire.*		#2. Assign RIN RIN = Facility ID – Standard Residual Designation (SRD) PLACE LABEL HERE			#3. Next Step *Go To Table...*
Solvent Cleaning Residual	**CBI**	**Copy Facility ID below**	**(SRD)**	**CBI**	
___ nonhazardous liquid residual from solvent cleaning		--	NSL		4c
___ hazardous liquid residual from solvent cleaning		--	HSL		4b
___ nonhazardous sludges from solvent cleaning residual		--	NSS		4c
___ hazardous sludges from solvent cleaning waste		--	HSS		4b
Water and/or Caustic Cleaning[1]	**CBI**	**Copy Facility ID below**	**(SRD)**	**CBI**	
___ nonhazardous liquid residual from wash water		--	NWL		4c
___ hazardous liquid residual from wash water		--	HWL		4b
___ nonhazardous sludges from wash water residual		--	NWS		4c
___ hazardous sludges from wash water residual		--	HWS		4b
___ nonhazardous liquid residual from caustic wash water		--	NCL		4c
___ hazardous liquid residual from caustic wash water		--	HCL		4b
___ nonhazardous sludges from caustic cleaning residual		--	NCS		4c
___ hazardous sludges from caustic cleaning residual		--	HCS		4b
Wastewater Treatment Sludges	**CBI**	**Copy Facility ID below**	**(SRD)**	**CBI**	
___ nonhazardous sludges from wastewater treatment		--	NWTS		4c
___ hazardous sludges from wastewater treatment		--	HWTS		4b
Emission Control Dust or Sludge	**CBI**	**Copy Facility ID below**	**(SRD)**	**CBI**	
___ nonhazardous emission control dust		--	NED		4c
___ hazardous emission control dust		--	HED		4b
___ nonhazardous emission control sludge		--	NES		4c
___ hazardous emission control sludge		--	HES		4b
Off-Specification Production Residual	**CBI**	**Copy Facility ID below**	**(SRD)**	**CBI**	
___ nonhazardous off-specification residual		--	NOR		4c
___ hazardous off-specification residual		--	HOR		4b

[1]For purposes of this questionnaire, a wash water does not include caustic. If wash water contains caustic, then you are managing a "caustic wash water."

Part 4b: Hazardous Residual (RIN) Characterization Information

Directions for Table 4b: *Copy and complete* a separate Table 4b for *each residual* identified in Table 4a as hazardous. **If you claim any information on Table 4b as CBI, complete a substantiation form (Appendix A) for each CBI claim and submit all of your completed forms to the address identified in Part 2, Question #4.**

Box #1 Enter RIN

Box #2 Enter the total volume and density of your RIN generated in the calendar year 1998. Specify units (e.g., gallons, m^3). We are requesting that you provide an estimate of the annual residual volume generated for each RIN you report. **If you know the volume, you must report this quantity.** We also will accept estimates based on best engineering judgement. For example:

- *Container Volumes.* If you know the volume of the container that the residual is either stored or shipped off in, then you may estimate the residual volume. In this case, you may know that you shipped one hundred 55-gallon drums off-site for disposal and that on average the drums were 75% filled with the residual you must report a residual volume for. You may report 4,125 gallons (55 x 100 x 0.75 = 4,125 gallons) as the residual volume.

- *Residual Density.* If you know a residual's density, then you may estimate the total volume of the residual you generate by dividing the mass you generate of a particular residual by that residual's density. For example, you may know that you generated 10,000 pounds of residual and that a typical density of that RIN is 2 pounds/gallon. In this case, you have generated 5,000 gallons of residual.

Box #3 Check (✔) whether RIN is generated during production of architectural; OEM (including industrial product finishes); or special purpose paints and coatings. For purposes of this questionnaire, refer to SIC 2851 (NAICS 325510) categorization of products as:

- Architectural – SIC 28511 (NAICS 32551010),
- OEM – SIC 28512 (NAICS 32551040), and
- Special purpose – SIC 28513 (NAICS 32551070).

Check all applicable categories for RIN – Refer to SIC and NAICS tables in Enclosure #4 to help you identify categories. If a residual is generated by more than one production process, check (✔) all applicable process categories.

Box #4 Enter all applicable Federal RCRA listed and characteristic hazardous waste codes.

Box #5 Directions for Table 4b, Box #5 are contained in the table.

Refer to example questionnaire responses in Enclosure 5 for clarification on how to complete Table 4b.

Table 4b: Hazardous Residual (RIN) Characterization

#1. RIN identified in Table 4a:_____ CBI_____		
#2. Total Volume Generated in 1998:_____ CBI_____ Density of Residual Generated in 1998:_____ CBI_____		
#3. Residual generated in production of Architectural Paints_____ CBI_____ OEM Paints _____ CBI_____ Special Purpose _____ CBI_____		
#4. Federal RCRA hazardous waste codes that apply to this RIN:		
#5. **If your residual carries a Federal RCRA...**	***for example... (EX)**	**then...**
listed hazardous waste code(s) **other than** F003	EX1: F005	STOP and go to Part 5 (Constituent Information)
listed hazardous waste code(s) **other than** F003 **and** characteristic hazardous waste code(s) **and/or** F003	EX1: F005, D001, D003 EX2: F005, F003 EX3: F005, F003, D001, D003	STOP and go to Part 5 (Constituent Information)
characteristic hazardous waste code(s) **and/or** F003	EX1: D007 EX2: D001, D008 EX3: F003 EX4: F003, D007, D001, D008	Go to Table 4c

* The examples in this table illustrate that a RIN may carry one or more of the example codes.

Part 4c: Residual Generation Rate and Management Characterization

Directions for Table 4c: *Copy and complete* a separate Table 4c *for each residual* identified in Table 4a as nonhazardous and Table 4b as a Federal RCRA characteristic hazardous waste (Dxxx Codes) and/or a Federal RCRA listed hazardous waste carrying the F003 code.

Refer to the Residual Management Matrix on page 12 if you need more clarification. **If you claim any information on Table 4c as CBI, complete a substantiation form (Appendix A) for each CBI claim and submit all of your completed forms to the address listed in Part 2, Question #4.**

Box #1 Enter RIN.

Box #2 Enter the total volume and density of your RIN generated in the calendar year 1998. Specify units (e.g., gallons, m^3). We are requesting that you provide an estimate of the annual residual volume generated for each RIN you report. **If you know the volume, you must report this quantity.** We also will accept estimates based on best engineering judgement. For example:

- *Container Volumes*. If you know the volume of the container that the residual is either stored or shipped off in, then you may estimate the residual volume. In this case, you may know that you shipped one hundred 55-gallon drums off-site for disposal and that on average the drums were 75% filled with the residual you must report a residual volume for. You may report 4,125 gallons (55 x 100 x 0.75 = 4,125 gallons) as the residual volume.

- *Residual Density*. If you know a residual's density, then you may estimate the total volume of the residual you generate by dividing the mass you generate of a particular RIN by that RIN's density. For example, you may know that you generated 10,000 pounds of residual and that a typical density of that RIN is 2 pounds/gallon. In this case, you have generated 5,000 gallons of residual Enter the total volume of your RIN generated in the calendar year 1998. Specify units.

Box #3 Check (✔) whether RIN is generated during production of architectural; OEM (including industrial product finishes); or special purpose paints and coatings. For purposes of this questionnaire, refer to SIC 2851 (NAICS 325510) categorization of products as:

- Architectural – SIC 28511 (NAICS 32551010),
- OEM – SIC 28512 (NAICS 32551040), and
- Special purpose – SIC 28513 (NAICS 32551070).

Check all applicable categories for RIN – Refer to SIC and NAICS tables in Enclosure 4 to help you identify categories. If a residual is generated during more than one production process, then check (✔) all applicable processes.

Box #4 Enter whether the RIN is stored (ST), treated (TRT), recycled (R), or disposed (D). Use these codes (i.e., ST, TRT, R, and D) to report on- and off-site management methods.

Box #5a Report all management unit(s) you use to manage the RIN. Refer to the Residual Management Unit Definition Table on page 19 for description of units. Specify management unit using the codes provided in this table.

If any of these units are physically the same, then report this type of unit once. If you report units together, specify the number of units in the code. For example, if you are reporting 5 hazardous tanks (HTK) together, use the code "HTK5" in box 5a.

If these units are physically different, then report each of the units separately(i.e., on a separate row).

Box #5b Check (✔) if unit is on-site (ON) or off-site (OFF).

Box #5c Assign unit a specific residual management unit ID code using Boxes #4, #5a, and #5b. Use the following standardized format:

#4 (Management Method) – #5a (Management Unit) – #5b (on-site or off-site) – Unique 3 Digit Numeric Code

For instance, if your facility disposes (D) this RIN in three physically different off-site (OFF) Subtitle D landfills (SDILF), then you may assign the following residual management unit codes to each landfill:

1. D – SDILF – OFF – 001
2. D – SDILF – OFF – 002
3. D – SDILF – OFF – 003

If these units were physically the same, then you would assign one residual management unit code: D – SDILF3 – OFF – 001.

Box #6 Enter facility name and address for residual management unit. If you specified in Box #5b that the management unit is on-site, then you do not need to re-enter your facility's name and address as long as it is the same address you reported in Part 3.

Box #7 Enter volume of total residual that was placed in (or sent to) each type of management unit during 1998 calendar year. Follow directions given for Table 4c, Box #2.

Box #8 Check (✔) whether more information (i.e., information requested on Tables 4d.1 through 4d.9) is available for each residual management unit type you specified in Box #5.

If you check "Yes," then you are ***required to complete*** applicable residual management unit Table(s) 4d.1-4d.9.

If you check "No," then it is understood that you ***cannot answer any*** of the information requests on the applicable residual management unit Table(s) 4d.1-4d.9. Go to Part 5.

Refer to example questionnaire responses in Enclosure 5 for clarification on how to complete Table 4c.

Residual Management Unit Definition Table: This table describes residual management units included in the scope of this questionnaire. Use the codes to complete Box #5a & #5c on Table 4c.

Residual Management Units (On-site and Off-site)	Codes	
Landfills (LF): Disposal facility or part of a facility where waste is placed in or on land and that is not a pile, a land treatment facility, a surface impoundment, an underground injection well, a salt dome formation, an underground mine, or a cave.	Subtitle D Industrial Landfill	(SDILF)
	Subtitle C Industrial Landfill	(SCILF)
	Municipal Landfill	(MLF)
Waste Piles (WP): Any non-containerized accumulation of solid, non-flowing waste that is used for treatment or storage and that is not a containment building.	Hazardous Waste Pile	(HWP)
	Nonhazardous Waste Pile	(NHWP)
Surface Impoundments (SI): A facility or part of a facility which is a natural topographic depression, man-made excavation, or diked area formed primarily of earthen materials (although it may be lined with man-made materials), which is designed to hold an accumulation of liquid wastes or wastes containing free liquids, and which is not an injection well. Examples of surface impoundments are holding, storage, settling, and aeration pits, ponds, and lagoons.	Hazardous Surface Impoundment	(HSI)
	Nonhazardous Surface Impoundment	(NHSI)
Tanks (TK): A stationary device, designed to contain an accumulation of hazardous waste which is constructed primarily of non-earthen materials (e.g., wood, concrete, steel, plastic) which provide structural support.	Hazardous Tank	(HTK)
	Nonhazardous Tank	(NHTK)
Land Application / Farming / Treatment (LAFT): Land treatment facility is a facility or part of a facility at which hazardous waste is applied onto or incorporated into the soil surface; such facilities are disposal facilities if the waste will remain after closure.	Hazardous Land Application/ Farming / Treatment	(HLAFT)
	Nonhazardous Land Application / Farming / Treatment	(NHLAFT)
Containers (C): Any portable device in which a residual is stored, transported, treated, disposed of, or otherwise handled.	Hazardous Containers	(HC)
	Nonhazardous Containers	(NHC)
Fuel Blender (FB), sent to Incinerator (INC), Light Weight Aggregate Kiln (LWAK), Cement Kiln (CK), or Boiler and Industrial Furnace (BIF). Refer to 40 CFR 260.10 for descriptions.	Fuel Blender	(FB)
	Incinerator	(INC)
	Light Weight Aggregate Kiln	(LWAK)
	Cement Kiln	(CK)
	Boiler and Industrial Furnace	(BIF)
Sent to a publicly owned treatment work (POTW), to a wastewater treatment facility (WWTF), to surface waters under a (NPDES) permit, or disposed of through underground injection (UI). Refer to 40 CFR 260.10 for descriptions of POTW and UI.	Publicly Owned Treatment Work	(POTW)
	Wastewater Treatment Facility	(WWTF)
	National Pollution Discharge elimination System	(NPDES)
	Underground Injection	(UI)
Other (O): This category applies to any waste management unit that is not described above. It includes, but is not limited to, management units that are applied to reuse, recycle or reclaim residuals. In Table 4d.9, you must provide a detailed description of this unit, including information on the unit's function and its configuration (e.g., surface area, height, lined or unlined, height).	Other	(O)

Table 4c: Residual Generation Rate and Management

If you are claiming any items entered in Box #1- Box #7 as CBI, place a check (✔) in the appropriate box.
See directions under Part 4c for further guidance.

#1. RIN (identified in Table 4a) CBI_____	#2. Total Volume Generated in 1998: _____ (If not entered in Table 4b) CBI ____ Density of Residual Generated in 1998:_____ (If not entered in Table 4b) CBI ____
	#3. Residual generated in production of: Architectural_____ OEM_____ Special Purpose_____ CBI ____ (If not entered in Table 4b)

#4. Mgt** Method (ST, TRT, R, D)	CBI	#5a. Mgt** Unit (Refer to Residual Mgt Definition Table for code)	CBI	#5b. Location			#5c. Mgt**Unit ID Code	#6. Management Unit – Facility Name and Address	CBI	#7. Residual Volume Managed in Unit in 1998	CBI	#8. More Info Available on Mgt Unit*
				On-Site	Off-Site	CBI						
								Name _____ Street _____ City _____ State _____ Zip _____				_____ Yes _____ No
								Name _____ Street _____ City _____ State _____ Zip _____				_____ Yes _____ No
								Name _____ Street _____ City _____ State _____ Zip _____				_____ Yes _____ No
								Name _____ Street _____ City _____ State _____ Zip _____				_____ Yes _____ No
								Name _____ Street _____ City _____ State _____ Zip _____				_____ Yes _____ No

* If you answer yes and more information is available proceed to Tables 4d.1-4d.9 in part 4d. If you answer no, go to Part 5.

** Mgt= Management

Part 4d: Residual Management Activity Information – Tables 4d.1-4d.9

Directions for Tables 4d.1-4d.9: *Copy and complete* a separate residual management table (4d.1-4d.9) for each management unit entered in Table 4c, Box #5c. ***Use available information to complete the tables.*** To identify the appropriate 4d table for each management unit, refer to the Action Table on the next page.

If you specified in Box #8 on Table 4c that you have no more information available for a management unit, then you are not required to complete the corresponding residual management table.

Also, if you claim any information on Tables 4d.1-4d.9 as CBI, complete a substantiation form (Appendix A) for each CBI claim and return all your completed forms to the address listed in Part 2, Question #4.

Box #1 Enter one management unit identification code from Table 4c, Box #5c. **You only need to supply information on this management unit once.**

Box #1a Specify the volumetric capacity of each management unit identified by the management unit ID code entered in Box #1. (Note: Box #1a does not apply to all tables.)

Box #2 Enter all RINs managed in this management unit.

Note: Characterize management units for Tables 4d.1-4d.9 as explained in the footnotes below each table. **If you cannot answer a data request, specify unknown (U) in the cell. Do not answer if you cannot verify your response. You may be asked at any time to substantiate information you provide on this questionnaire. Instructions for other boxes are contained in footnotes below the tables.**

Refer to example questionnaire responses in Enclosure 5 for clarification on how to complete Tables 4d.1-4d.9.

Action Table: This table specifies which table to fill out for each type of management unit included in the scope of this questionnaire.

If your management unit (on and off-site) is a...	**Then go to Table...**
Landfill (LF)	4d.1
Waste Pile (WP)	4d.2
Surface Impoundment (SI)	4d.3
Tank (TK)	4d.4
Land Application / Farming / Treatment (LAFT)	4d.5
Container (C)	4d.6
Fuel Blender (FB), sent to Incinerator (INC), Light Weight Aggregate Kiln (LWAK), Cement Kiln (CK), or Boiler and Industrial Furnace (BIF)	4d.7
Sent to a publicly owned treatment work (POTW), to a wastewater treatment facility (WWTF), to surface waters under a (NPDES) permit, or disposed of through underground injection (UI)	4d.8
Other (O)	4d.9

Table 4d.1: Landfills

#1 Management Unit Identification Code[1]	___ CBI
#1a. Volumetric Capacity of each unit:	___ CBI
#2. RINs:	___ CBI

#3. Residual Management in Landfills	#4. liners[2] _____ CBI							#5. run on/ run off controls [3] _____ CBI	#6. daily cover[4] ___ CBI
	liner	leachate collection layer	re-compacted clay	re-compacted soil other than clay	synthetic liner	concrete pad	other liner (specify below)		
subtitle D industrial waste landfill _____ CBI									
subtitle C industrial waste landfill _____ CBI									
municipal waste landfill _____ CBI									

Additional Information:

[1]Identified in Table 4c, Box #5c

[2]Indicate whether the listed type of liner is associated with the landfill with a yes (Y), no (N), or unknown (U). ***If the landfill is off-site and the liner is unknown, indicate unknown (U). Do not guess at the liner type.***

Native soils/clay soils already present underneath the unit and sludge layers do not qualify as liners. For this case, mark no (N) in the liner column. If the type of liner present beneath your unit is not indicated on this table, write in the liner type in the column labeled "other." Use the space provided in "Additional Information" if you need more space.

[3] Indicate whether run on/run off controls are present with a yes (Y), no (N) or unknown (U). Run on/Run off controls are engineered barriers such as berms and dikes that will prevent water in soils from running on to and off of the unit.

[4] Indicate whether a daily cover is applied while the landfill is operating with a yes (Y), no (N) or unknown (U).

If you claim any information on this table as CBI, complete a substantiation form (Appendix A) for each CBI claim and return all forms to the address specified in Part 2, Question #4.

Table 4d.2: Waste Piles

#1. Management Unit Identification Code[1]	____ CBI
#1a. Volumetric Capacity of each unit:	____ CBI
#2. RINs:	____ CBI

#3. Residual Management in Waste Piles	#4. liners and/or secondary containment[2] _____ CBI							#5. run on/ run off control[3] ____ CBI
	liner	leachate collection layer	re-compacted clay liner	re-compacted soil layer other than clay	synthetic liner	concrete pad	other liner (specify below)	
treatment in waste piles _____ CBI								
storage in waste piles _____ CBI								

Additional Information:

[1]Identified in Table 4c, Box #5c

[2] Indicate whether the listed type of liner is associated with the waste pile with a yes (Y), no (N), or unknown (U). ***If the waste pile is off-site and the liner is unknown, indicate unknown (U). Do not guess at the liner type.***

Native soils/clay soils already present underneath the unit and sludge layers to not qualify as liners. For this case, mark no (N) in the liner column. If the type of liner present beneath your unit is not indicated on this table, write in the liner type in the column labeled "other." Use the space provided in "Additional Information" if you need more space.

[3] Indicate whether runoff controls are present with a yes (Y), no (N) or unknown (U). Runoff controls are engineered barriers such as berms and dikes that will prevent water and soils from running on to and off of the unit.

If you claim any information on this table as CBI, complete a substantiation form (Appendix A) for each CBI claim and return all forms to the address specified in Part 2, Question #4.

Table 4d.3: Surface Impoundments

#1. Management Unit Identification Code[1]	___ CBI
#1a. Volumetric Capacity of each unit:	___ CBI
#2. RINs:	___ CBI

#3. Residual Management in Surface Impoundment	#4. liners[2] ____ CBI							#5. aeration/ biological treatment[3] ____ CBI				#6. covers/emission control[4] ____ CBI		
	liner	leachate collection layer	re-compacted clay liner	re-compacted soil other than clay	synthetic liner	concrete pad	other liner (specify below)	aeration	low aeration	high aeration	biological treatment	cover	cover with vents and NO emission collection system	cover with vents and emission collection system
storage in surface impoundments ____ CBI														
treatment in surface impoundments ____ CBI														
disposal in surface impoundment ____ CBI														

Additional Information:

[1] Identified in Table 4c, Box #5c

[2] Indicate whether the listed type of liner is associated with the surface impoundment with a yes (Y), no (N), or unknown (U). ***If the surface impoundment is off-site and the liner is unknown, indicate unknown (U). Do not guess at the liner type.***

Native soils/clay soils already present underneath the unit and sludge layers do not qualify as liners. For this case, mark no (N) in the liner column. If the type of liner present beneath your unit is not indicated on this table, write in the liner type in the column labeled "other." Use the space provided in "Additional Information" if you need more space.

[3] Indicate whether the surface impoundment is aerated or not, or, whether it has a low or high level of aeration, by placing a yes (Y), no (N) or unknown (U) in each column.

Low aeration is defined as a surface impoundment that contains aerators with a power of 70 hp (horsepower)/million gallons; high aeration aerators operate at greater than 70 hp (horsepower)/million gallons.

Also, indicate if biological treatment is occurring by placing a yes (Y), no (N) or unknown (U) in the each biological treatment column.

[4] Indicate whether the surface impoundment is covered and if so, whether or not the cover has vents that directly release to the atmosphere or into an emission collection system. Place a yes (Y), no (N) or unknown (U) in each column for your unit.

If you claim any information on this table as CBI, complete a substantiation form (Appendix A) for each CBI claim and return all forms to the address specified in Part 2, Question #4.

Table 4d.4: Tanks

#1. Management Unit Identification Code[1]									____ CBI
#1a. Volumetric Capacity of each unit:									____ CBI
#2. RINs:									____ CBI
#3. Residual Management in Tanks ____ CBI	#4. Location		#5. aeration/biological treatment[2] ____ CBI				#6. covers/emission control[3] ____ CBI		
	Above Ground	Under Ground	aeration	aeration		biological treatment	cover	cover with vents and NO emission collection system	cover with vents and emission collection system
				Low Aeration	High Aeration				
storage in tanks									
treatment in tanks									

Additional Information:

[1]Identified in Table 4c, Box #5c

[2] Indicate whether the tank is aerated or not and, if aerated, indicate whether it has a low or high level of aeration by placing a yes (Y), no (N) or unknown (U) in each column.

Low aeration is defined as a tank that contains aerators with a power of 70 hp/million gallons; high aeration aerators operate at greater than 70 hp/million gallons.

Also, indicate if biological treatment is occurring by placing a yes (Y), no (N) or unknown (U) in the biological treatment column.

[3] Indicate whether the tank is covered and, if so, whether or not the cover has vents that directly release to the atmosphere or into an emission collection system. Place a yes (Y), no (N) or unknown (U) in each column for your unit.

If you claim any information on this table as CBI, complete a substantiation form (Appendix A) for each CBI claim and return all forms to the address specified in Part 2, Question #4.

Table 4d.5: Land Application/Treatment/Farming

#1. Management Unit Identification Code[1]	_____ CBI
#1a. Volumetric Capacity of each unit:	_____ CBI
#2. RINs:	_____ CBI

#3. Residual Management in Land Application/Treatment/Farming _____ CBI	#4. liners[2] _____ CBI						#5. run on/ run off control[3] ____ CBI	#6. Application Method[4] _____ CBI			
	liner	leachate collection layer	re-compacted clay liner	re-compacted soil other than clay	synthetic liner	other liner (specify below)		soil incorporation: tilling or disking	soil incorporation: surface injection	surface application - not spraying	surface application by spraying
land application/treatment/ or farming unit											

Additional Information:

[1]Identified in Table 4c, Box #5c

[2]Indicate whether the listed type of liner is associated with the landfill with a yes (Y), no (N), or unknown (U). ***If the landfill is off-site and the liner is unknown, indicate unknown (U). Do not guess at the liner type.***

Native soils/clay soils already present underneath the unit and sludge layers do not qualify as liners. For this case, mark no (N) in the liner column. If the type of liner present beneath your unit is not indicated on this table, write in the liner type in the column labeled "other." Use the space provided in "Additional Information" if you need more space.

[3] Indicate whether run on/run off controls are present with a yes (Y), no (N) or unknown (U). Run on/Run off controls are engineered barriers such as berms and dikes that will prevent water in soils from running on to and off of the unit.

[4] Indicate the method used to apply the residual by placing a yes (Y), no (N) or unknown (U) in each column. If the residual is incorporated into the soil by tilling or disking, mark yes (Y) in the 1st column under application.

If the residual is incorporated into the soil by injection, mark yes (Y) in the 2nd column under application.

If the residual is not incorporated into the soil and is applied on top of the unit by a method other than spraying, mark yes (Y) in the 3rd column under application.

Finally, if the residual is spray applied onto the unit mark yes (Y) in the 4th column under application. If more than one method is used on the unit, mark yes (Y) in all the columns that apply.

If you claim any information on this table as CBI, complete a substantiation form (Appendix A) for each CBI claim and return all forms to the address specified in Part 2, Question #4.

Table 4d.6: Containers

#1. Management Unit Identification Code[1]					_____ CBI
#1a. Volumetric Capacity of each unit:					_____ CBI
#2. RINs:					_____ CBI
#3. Residual Management in Containers _____ CBI	#4. container types[2] _____ CBI				#5. Maximum Number of Days Stored in Container[3] _____ CBI
	drums	roll-offs	bags	Other (Specify Below)	
storage in containers					

Additional Information:

[1]Identified in Table 4c, Box #5c

[2] Identify the type of container that is used for storing your residual with a yes (Y), no (N), or unknown (U). If multiple container types are used, specify with a "Y" in all columns that apply. If the container type is not listed, describe the container in the column labeled "other." Use the space provided in "Additional Information" if you need more space.

[3] Specify the maximum number of days that the residual is stored in the containers. Enter a number into the column, for example "10 days."

If you claim any information on this table as CBI, complete a substantiation form (Appendix A) for each CBI claim and return all forms to the address specified in Part 2, Question #4.

Table 4d.7: Use In Fuel Blending, Management in Incinerators, Light Weight Aggregate Kilns, Cement Kilns, or in Boilers and/or Industrial Furnaces

#1. Management Unit Identification Code [1]	_____ CBI	
#2. RINs:	_____ CBI	
#3. Residual Management Activity	#4. Location _____ CBI	
	on-site	off-site
Fuel Blending _____ CBI		
Incineration _____ CBI		
Light Weight Aggregate Kilns _____ CBI		
Cement Kilns _____ CBI		
Burning in boiler or industrial furnace _____ CBI		

Additional Information:

[1] identified in Table 4c, Box #5c

If you claim any information on this table as CBI, complete a substantiation form (Appendix A) for each CBI claim and return all forms to the address specified in Part 2, Question #4.

Table 4d.8: Management in POTWs, NPDES, WWTFs, Underground Injection Wells, or Other Disposal not Listed

#1. Management Unit Identification Code[1]:	____ CBI
#2. RINs:	____ CBI

#3. Residual Management to POTWs, NPDES, WWTFs, Underground Injection, and Other Types of Treatment.	#4. Location ____CBI	
	on-site	off-site
discharge to POTW ____ CBI _____ (total volume)[2]		
discharge to WWTF ____ CBI _____ (total volume)		
discharge under NPDES permit ____ CBI _____ (total volume)		
discharge to privately owned treatment ____ CBI _____ (total volume)		
underground injection ____ CBI 5) if so, permit number _____ Class ☐1 ☐2 ☐3 ☐4 ☐ 5 (Type of well)		

Additional Information:

[1]Identified in Table 4c, Box #5c

[2] Specify total facility volume sent to each discharge point in the space provided next to each management type.

If you claim any information on this table as CBI, complete a substantiation form (Appendix A) for each CBI claim and return all forms to the address specified in Part 2, Question #4.

Table 4d.9: Management in Other Disposal not Listed

#1 Management Unit Identification Code[1]	_____ CBI
#1a Volumetric Capacity of each unit:	_____ CBI
#2 RIN:	_____ CBI

#3 Residual Management to Other Types of Treatment.[2]	Residual Management Unit Description
other type of **treatment** _____ CBI	
other type of **storage** _____ CBI	
other type of **disposal** _____ CBI	

Additional Information:

[1]Identified in Table 4c, Box #5c

[2]This is the table to use to fill out information on other residual waste management practices you may employ at your facility that were not covered in the previous tables. If this is the case, then describe the treatment, storage, or disposal practice you use under "Residual Management Unit Description." Use the space provided under "Additional Information" if you need more space.

If you claim any information on this table as CBI, complete a substantiation form (Appendix A) for each CBI claim and return all forms to the address specified in Part 2, Question #4.

PART 5: RESIDUAL CHEMICAL CONSTITUENT INFORMATION

This part is divided into two sections. Part 5a asks you to identify chemical constituents present in each of your residuals. Part 5b requests information on analytical methods you have applied to these residuals.

Part 5a: Residual Chemical Identification

The Agency is initially studying the following chemical constituents found in residuals generated from the manufacture of paints. The purpose is to assess whether or not there are any risks to human health and the environment which could occur from the current management of the residuals under study. The following list has been developed from data found in publicly available information (e.g., literature on raw material usage in the industry).

For purposes of this questionnaire, a ***chemical constituent*** ("constituent") is any organic or inorganic chemical compound or element present in a residual (as discussed in Part 1, Section #4). A constituent may be present in a residual because it is (1) carried through the manufacturing process from use as a raw material, (2) formed from any chemical reactions during the paint manufacturing process, (3) formed from degradation reactions over time during storage, and (4) added to the residual stream through cleaning processes.

Directions for Table 5a.1: Copy and complete a separate Table 5a.1 *for each residual (RIN)* you identified in Table 4a. Place a check (✔) in the box next to each constituent listed below that is present in your residual for the calendar year 1998 *only*.

If you do not check a constituent, then it is understood that the constituent is not, or could not, be present in your residual(s) for the calendar year 1998. As specified earlier, you are not required to generate any new data to complete this table.

If you consider any of this information in Table 5a.1 to be Confidential Business Information, place a check (✔) in the CBI blank next to the constituent, complete a substantiation form (Appendix A) for each CBI claim and return all completed forms to the address listed in Part 2, Question #4.

Directions for Table 5a.2: Table 5a.2 is an **optional** table provided for those facilities that want to designate additional information on constituent volumes in your residuals generated in 1998. The specific directions for Table 5a.2 follow Table 5a.1.

Table 5a.1: Residual Chemical Identification

RIN:_____

Constituent	CASRN (Reference)	Present (✔)	CBI (✔)
Acetone	67-64-1		
Acrylamide and Acrylamide-derived polymers	79-06-1		
Acrylonitrile and Acrylonitrile-derived polymers	107-13-1		
Allyl Alcohol	107-18-6		
Antimony & Compounds	7440-36-0		
Barium & Compounds	7440-39-3		
Benzene	71-43-2		
Benzyl Alcohol	100-51-6		
Butyl Benzyl Phthalate	85-68-7		
Cadmium & Compounds	7440-43-9		
Chloroform	67-66-3		
Chromium & Compounds	16065-83-1		
Cobalt & Compounds	7440-48-4		
Copper & Compounds	7440-50-8		
Cyanide	57-12-5		
Cyclohexane	110-82-7		
Dibutyl Phthalate	84-74-2		
3-(3,4-Dichlorophenyl-1)1 dimethylurea	330-54-1		
Diethyl Phthalate	84-66-2		
Di (2-ethylhexyl) Phthalate	117-81-7		
2,4 Dimethylphenol	105-67-9		
1,4 Dioxane	123-91-1		
Ethyl Acetate	141-78-6		
Ethylbenzene	100-41-4		
Ethylene Glycol	107-21-1		

RIN:_____

Constituent	CASRN (Reference)	Present (✔)	CBI (✔)
Formaldehyde and Formaldehyde-derived polymers	50-00-0		
Isophorone	78-59-1		
Lead & Compounds	7439-92-1		
M-Cresol	108-39-4		
Methanol	67-56-1		
Methyl Acrylate	96-33-3		
Methylene Chloride	75-09-2		
Methyl Ethyl Ketone	78-93-3		
Methyl Isobutyl Ketone	108-10-1		
Methyl Methacrylate and Methyl Methacrylate-derived polymers	80-62-6		
2,2 Methylenebis (3,4,6-trichlorophenol)	70-30-4		
Mercury & Compounds	7439-97-6		
Molybdenum & Compounds	7439-98-7		
M-Xylene	108-38-3		
Naphthalene	91-20-3		
N-Butyl Alcohol	71-36-3		
Nickel & Compounds	7440-02-0		
Nitrobenzene	98-95-3		
2-Nitropropane	79-46-9		
O-Cresol	95-48-7		
O-Xylene	95-47-6		
P-Cresol	106-44-5		
Pentachlorophenol	87-86-5		
Phthalic Anhydride	85-44-9		
Phenol	108-95-2		
Selenium & Compounds	7782-49-2		

RIN:_____			
Constituent	**CASRN (Reference)**	**Present (✔)**	**CBI (✔)**
Silver & Compounds	7440-22-4		
Styrene and Styrene-derived polymers	100-42-5		
Tetrachloroethene	127-18-4		
Tin & Compounds	7440-31-5		
Toluene	108-88-3		
Toluene diisocyanate	26471-62-5		
1,2,4-Trichlorobenzene	120-82-1		
1,1,1 Trichloroethane	71-55-6		
Trichloroethene	79-01-6		
2,4,6 Trichlorophenol	88-06-2		
Vanadium & Compounds	7440-62-2		
Vinyl Acetate and Vinyl Acetate-derived polymers	108-05-4		
Vinylidene Chloride and Vinylidene Chloride-derived polymers	75-35-4		
Xylene (mixed isomers)	1330-20-7		
Zinc & Compounds	7440-66-6		

Table 5a.2: Optional Additional Information on Constituent Volumes in Residual

Directions for Table 5a.2: Use the optional table below to provide any information that you would like to report regarding the amounts of any of the Table 5a.1 constituents in your RIN. This opportunity is offered to you so that you may indicate either the frequency of occurrence of any particular Table 5a.1 constituent in your RIN or the percent by volume of any Table 5a.1 constituent in your RIN. For example, you may have reported 5000 gallons of this RIN, but only 1% of this volume is lead compounds, 2% is chromium compounds and 5% is xylene compounds. Alternatively, you may report that 1 out of 100 drums of residual contained lead compounds, 2 out of 100 contained chromium compounds and 5 out of 100 contained xylene compounds.

Completion of this table is optional and is not required under this Section 3007 Request for Information.

Table 5a.2 Table to Record Amount of Constituents in RIN

Constituent found in **RIN:**_____	Frequency of Occurrence of Constituent in RIN	Fraction (Percent) of Constituent in RIN

Part 5b. Test Methods for Constituents Reported in this Questionnaire

Please use the empty box provided below to list the analytical method(s) (by title or number) that you have used to analyze your residual streams, along with the detection limits reported by the laboratory for such analyses. Please also describe any analytical problems you have experienced in the determination of total and leachable (e.g., using the Toxicity Characteristic Leaching Procedure, or TCLP) constituent concentrations.

PART 6: CERTIFICATION

Responses may be typed or handwritten neatly. The signature/certification block in Part 6 must be completed by a senior official having authority over plant operations. It may not be completed by a consultant or any other third party.

Part 6a. Certification of Information Provided

I certify under penalty of law that I have personally reviewed and am familiar with the information contained in the questionnaire, and, based on my inquiry of those responsible for obtaining the information, I believe the above to be true and complete and I am aware that there are substantial penalties for submitting false information, and penalties for not returning this questionnaire to the Agency in the time period required.

Signature _____ Dated _____

Printed Name _____

Title _____

Telephone _____

Authority for the collection of the above information is contained in the Resource Conservation and Recovery Act (RCRA), 42 USC 6901 et seq.

Part 6b. Certification For Non-Manufacturer of Paint

I certify under penalty of law that I have reviewed the history of this company and am familiar with current production and residual management generation, and that this company does not currently manufacture paint and does not generate paint residual covered under the scope of this questionnaire.

Signature _____ Dated _____

Printed Name _____

Title _____

Telephone _____

PLEASE BE SURE TO RETAIN A COPY OF YOUR SIGNED COMPLETED QUESTIONNAIRE FOR YOUR RECORDS

Appendix A
Confidentiality Claims

Substantiating the Claim of Confidentiality

You may make a confidential business information (CBI) claim for each data element that is sensitive data. The following series of questions needs to be filled out **for each data element** that you claim is CBI. Attach additional pages as needed.

Should the Agency decide to deny your CBI claim, you will be notified by mail within 10 days of such an action.

DATA ELEMENT: _____

1. For what period of time do you request that the information be maintained as confidential? If the occurrence of a specific event will eliminate the need for confidentiality, please specify that event.

2. What measures have you taken to protect the information claims as confidential? Have you disclosed the information to anyone other than a governmental body or someone who is bound by an agreement not to disclose the information further (e.g., have you disclosed any information in a Material Safety Data Sheet)? If so, why should the information still be considered confidential?

3. Has any governmental body made a determination as to the confidentiality of the information? If so, please attach a copy of the determination.

4. Is the information contained in any publicly available material such as promotional publications, annual reports, articles, permits, etc.? Is there any means by which a member of the public could obtain access to the information?

5. For each section of information claimed as confidential, discuss with specificity why release of the information is likely to cause substantial harm to your competitive position. Explain the nature of these harmful effects, why they should be viewed as substantial, and the causal relationship between disclosure and such harmful effects. How could your competitors make use of this information to your detriment?

6. Please discuss any other information you deem relevant.